FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, D | D.C. 20549 |
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IN BENEFICIAL OWNERSHIP

| STATEMENT | OF | CHA | NGES |
|-----------|----|-----|------|

| OMB APPROVAL | | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|--|
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| hours per response: | 0.5 | | | | | | | | | |

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* Fairman Jeff | | | | | Issuer Name and Ticker or Trading Symbol Vaxcyte, Inc. [PCVX] Date of Earliest Transaction (Month/Day/Year) 12/09/2021 | | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | |
|---|-----------------------|--------------|--|----------------------|---|-------------------------|---|-----------|---|----------|---|--|---|---|---|--|---------|---------------------------------------|--|
| (Last) (First) (Middle) C/O VAXCYTE, INC. 353 HATCH DRIVE | | | | | | | | | | | | | | | X Officer (give title Other (specify below) VP, Research | | | | |
| (Street) | CITY C | | 94404 | | 4. If Amendment, Date of | | | | of Original Filed (Month/Day/Year) | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | | |
| | | | le I - No | | | _ | | | 1 | l, Di | - | | | ally Owner | | | | | |
| 1. Title of Security (Instr. 3) | | | 2. Transaction Date (Month/Day/Yea | | Execution Date, | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 a 5) | | | Beneficial Owned Fo | y Form: (D) or | | ndirect | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | | Code | v | Amount | (A) or (D) | Price | e Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. | *) | |
| Common | Common Stock 12/09/20 | | | 2021 | 021 | | | М | | 131 | A | \$1.79 | 6,29 | 6,291(1) | | D | | | |
| Common | Common Stock 12/09/ | | 2021 | 021 | | S ⁽²⁾ | | 131 | D | \$22. | 6,16 | 6,160 | | D | | | | | |
| Common | ommon Stock | | | | | | | | | | | | 341,2 | 341,227 | | I | | By Fairman Family Trust | |
| Common Stock | | | | | | | | | | | | | 50,0 | 50,000 | | I | | By AF 2020 Irrevocable Trust | |
| | | Т | able II | - Deriva (e.g., r | tive s | Secu calls | rities , war | Acq | uired, | Dispons, | posed of converti | , or Ben | eficial urities | ly Owned | | | | | |
| 1. Title of 2. 3. Transaction 3A. Deemed Execution Date Execution Date, or Exercise (Month/Day/Year) if any | | 4. Transa | ransaction ode (Instr.) Secu Acqu (A) o Dispo | | vative prities | | Exerci | sable and | 7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Num derivat Securit Benefic Owned Followi Report Transa (Instr. 4 | ive ies cially ing ed ction(s) | ve Owners es Form: ally Direct (i) or Indirect dtion(s) | | D) Beneficial Ownership ect (Instr. 4) | | | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | able | Expiration Date | Title | Amoun or Numbe of Shares | | | | | | |
| Stock Option (right to buy) | \$1.79 | 12/09/2021 | | | M | М | | 131 | (3) | | 05/17/2027 | Common Stock | 131 | \$0.00 | 62,714 | | D | | |

Explanation of Responses:

- $1.\ Includes\ 1,016\ shares\ acquired\ under\ the\ Employee\ Stock\ Purchase\ Plan\ on\ November\ 17,\ 2021.$
- 2. The sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan.
- 3. The shares subject to the option are fully vested and exercisable

Remarks:

/s/ Ron A. Metzger, Attorney-

12/13/2021

in-Fact

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.